

UTILITY PATENT APPLICATION TRANSMITTAL <small>(only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. GYN-5013
<i>See MPEP Chapter 600 concerning utility patent application contents.</i>		First Inventor Daniel J. Smith
		Title IMPROVED SURGICAL INSTRUMENT AND METHOD FOR THE TREATMENT OF URINARY INCONTINENCE
		Express Mail Label No. EV 065843249 US

APPLICATION ELEMENTS		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
<p>See MPEP Chapter 600 concerning utility patent application contents.</p> <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 19] <i>(Preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 7]</p> <p>5. Oath or Declaration [Total Pages 3]</p> <p>a. <input checked="" type="checkbox"/> Unexecuted (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i></p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper </p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p>

U.S. PTO
 10/706559
 22581
 111203



ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))

10. 37 CFR 3.73(b) Statement Power of Attorney *(when there is an assignee)*

11. English Translation Document *(if applicable)*

12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations

13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. Certified Copy of Priority Document(s) *(if foreign priority is claimed)*

16. Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.

17. Other

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-Part (CIP) of prior application No.: , filed

Prior application information: Examiner Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

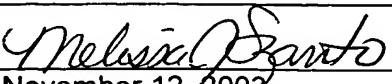
19. CORRESPONDENCE ADDRESS
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20. TELEPHONE CONTACT

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21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Melissa J. Szanto	Reg. No. 40834
SIGNATURE		
DATE	November 12, 2003	

FEE TRANSMITTAL		<i>Complete if Known</i>	
		Application Number	
		Filing Date	November 12, 2003
		First Named Inventor	Daniel J. Smith
		Group Art Unit	
		Examiner Name	
		Attorney Docket Number	GYN-5013

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	22 - 20 =	2	x 18.00	\$ 36.00
INDEPENDENT CLAIMS	3 - 3 =	0	x 84.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$280.00	
			TOTAL FEES	\$ 806.00

METHOD OF PAYMENT

Please charge Deposit Account No. 10-0750/GYN-5013/MJS in the amount of \$806.00.
 Three copies of this sheet are enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/GYN-5013/MJS. Three copies of this sheet are enclosed.

SUBMITTED BY:		<i>Complete (if applicable)</i>	
Typed or Printed Name	Melissa J. Szanto	Reg. No. 40,834	
Signature	<i>Melissa J. Szanto</i>	Date: 11/12/2003	Deposit Account No. 10-0750

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

Applicant: Daniel J. Smith, et al.

For : IMPROVED SURGICAL INSTRUMENT AND METHOD FOR THE
TREATMENT OF URINARY INCONTINENCE

Express Mail Certificate

"Express Mail" mailing number: ev 065843249 us

Date of Deposit: November 12, 2003

I hereby certify that this complete application, including specification pages, claims, and drawings, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Laurie Phillips

(Typed or printed name of person mailing paper or fee)

Laurie Phillips

(Signature of person mailing paper or fee)